

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2	/		/			
3	/		/			
4	/		/			
5	/		/			
6	/					
7	/		/			
8	/		/			
9	/		/			
10	/					
11	/		/			
12	/		/			
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14	/		/			
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43	/		/			
44	/					
45	/					
46	/					
47	/		/			
48	/					
49	/					
50	/		/			
TOTAL IND.	15					
TOTAL DEP.	62					
TOTAL CLAIMS	77					

*	IND.	DEP.	*	IND.	DEP.	*
51	/					
52	/					
53	/					
54	/					
55	/					
56	/					
57	/					
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95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS